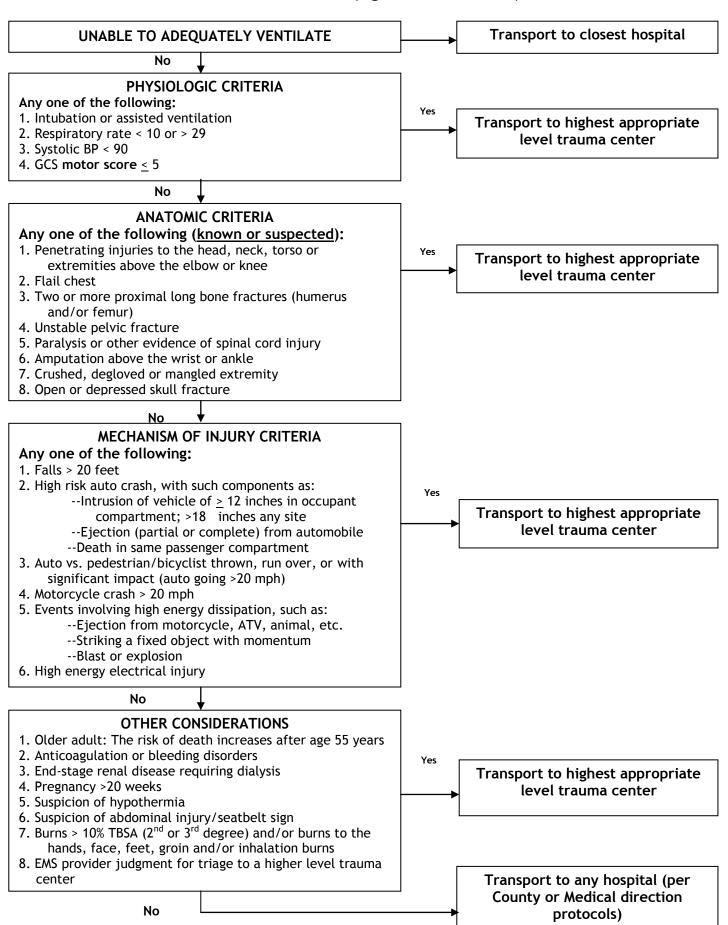


Prehospital Trauma Triage Destination Guidelines (Adult & Pediatric)

Prehospital Trauma Triage Algorithm Adult Patients (Ages 15 and older)



No

Prehospital Trauma Triage Algorithm Pediatric Patients (Less than 15 years old)

Pediatric Patients (Less than 15 years old) **UNABLE TO ADEQUATELY VENTILATE** Transport to closest hospital No PHYSIOLOGIC CRITERIA Any one of the following: 1. Intubation or assisted ventilation 2. Any signs or symptoms of respiratory insufficiency, such as: --Severe hypoxia Transport to highest Yes --Accessory muscle use, grunting or abdominal breathing appropriate level trauma 3. Any signs or symptoms of abnormal perfusion, such as: center --Decreased capillary refill (> 2 sec) Age SBP (mmHg) --Low systolic BP for age <60 <1 year 4. Only responsive to pain or 1-10 years <70 + 2 x Age unresponsive [AVPU] <90 >10 years No ANATOMIC CRITERIA Any one of the following (known or suspected): 1. Penetrating injuries to the head, neck, torso or extremities above the elbow or knee Yes Transport to highest appropriate level 3. Two or more proximal long bone fractures (humerus and/or femur) trauma center 4. Unstable pelvic fracture 5. Paralysis or other evidence of spinal cord injury 6. Amputation above the wrist or ankle 7. Crushed, degloved or mangled extremity 8. Open or depressed skull fracture No MECHANISM OF INJURY CRITERIA Any one of the following criteria: Yes Transport to highest 1. Falls > 15 feet or 3x the height of the child 2. High risk auto crash, with such components as: appropriate level --Intrusion of vehicle of > 12 inches in occupant compartment; >18 inches any site trauma center --Ejection (partial or complete) from automobile -- Death in same passenger compartment --Moderate/high speed crash with unrestrained or improperly restrained child 3. Auto vs. pedestrian/bicyclist thrown, run over, or with significant impact (auto going >20 mph) 4. Motorcycle crash > 20 mph 5. Events involving high energy dissipation, such as: --Ejection from motorcycle, ATV, animal, etc. --Striking a fixed object with momentum --Blast or explosion 6. High energy electrical injury No Yes OTHER CONSIDERATIONS Transport to highest 1. Suspicion for non-accidental trauma appropriate level 2. Anticoagulation or bleeding disorders trauma center 3. End-stage renal disease requiring dialysis 4. Pregnancy >20 weeks 5. Suspicion of hypothermia 6. Intra-abdominal injury: abdominal tenderness, distension or seatbelt mark on the torso 7. Burns > 10% TBSA (2^{nd} or 3^{rd} degree) and/or burns to the hands, face, feet, or groin; or inhalation injury 8. EMS provider judgment for triage to a higher level trauma center

Transport to any hospital

(per County or Medical direction protocols)

Document References:

- 1. During a multiple casualty event, SWRETAC MCI Field Operation Guidelines will be utilized in destination decisions.
- 2. This algorithm applies to both aeromedical and ground scene transports.
- 3. Bypass and Divert status will apply when transport destination does not follow destination guideline for patients meeting the identified criteria. Pre-hospital will communicate and collaborate with hospital medical control to determine appropriate destination.
- 4. A facility may divert a patient originating within their catchment area only if the facility does not have capacity and/ or capability. Individual facility diverts and bypass guidelines may apply.
- 5. Facilities will follow Colorado state rules and regulations on divert and bypass in coordination with SWRETAC.

REGIONAL FACILITY DESTINATIONS:

- ➤ Mercy Regional Medical Center Durango, CO (Level III)
- ➤ Southwest Memorial Hospital Cortez, CO (Level IV)
- ➤ Animas Surgical Hospital- Durango, CO (Level IV)
- Pagosa Springs Medical Center-Pagosa Springs, CO (Non-Designated)

REGIONAL TRAUMA FACILITY PARTNERS:

San Juan Regional Medical Center Farmington, NM (Level III)

DEFINITIONS:

- 1. The definition of "appropriate" throughout this document refers to the highest level available in the timeliest manner.
- 2. SWRETAC Trauma Patient Catchment Areas Defined by area trauma centers (which would normally be the area covered by normal ground transport)
- 3. Bypass Initiated by a pre-hospital transporting agency in accordance with this SWRETAC destination protocol and medical control guidelines.
- 4. Divert Initiated by a medical facility due to lack of capability and/or capacity.